



Lee County
Southwest Florida

Procurement Management Division
2115 Second Street, 1st Floor
Fort Myers, FL 33901

Notice of Extension

Kevin Ruane
District One

Cecil L Pendergrass
District Two

Ray Sandelli
District Three

Brian Hamman
District Four

Frank Mann
District Five

Roger Desjarlais
County Manager

Richard Wesch
County Attorney

Donna Marie Collins
Hearing Examiner

October 21, 2021

Mr. Justin Hitzig
Backwoods Clearing and Services, Inc.
4407 Hitzing Ave
N Fort Myers, FL 33903

Re: Extension of Annual Contract No. RFP160553DKR
Fencing Services for Lee County

Dear Mr. Hitzig:

Lee County Board of County Commissioners (County) and Backwoods Clearing and Services, Inc., (Vendor), by execution of this Notice of Extension, have both agreed to the First extension of the above referenced contract/agreement for the period of February 21, 2022 through July 20, 2022, six (6) months at the agreed upon terms and conditions.

The issuance of the purchase order is done with the understanding that all provisions in the solicitation are binding, establishing a contractual obligation by both the County and the Vendor.

If this extension is acceptable, please acknowledge by signing and returning a copy of this letter with a copy of your current Certificate of Insurance to my attention.

Please return an executed copy of this letter and current Certificate of Insurance by Monday, November 01, 2021. If you have any questions, please contact me at (239) 533-8871 or kurban@leegov.com.

Lee County

Vendor Acknowledgement:

Signature of Authorized Official
Mary G. Tucker, CPPO, CPPB, CPM

Print Name

Director of Procurement Management

Title

Date

Signature

Print Name

Title

Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/21/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Desoto Moulton - Arcadia 243 N Brevard Ave Arcadia FL 34266	CONTACT NAME: Mildred A. DeLuca	FAX (A/C, No): 863-494-1991
	PHONE (A/C, No, Ext): 863-494-2242	E-MAIL ADDRESS: mad@desotomoulton.com
License#: L100460 BACKCLE-01	INSURER(S) AFFORDING COVERAGE	
INSURED Backwoods Clearing & Services, Inc. 4407 Hitzing Ave N Ft Myers FL 33903-5841	INSURER A: Southern-Owners Insurance Company NAIC # 10190	
	INSURER B: Auto-Owners Insurance Company 18988	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 1290159544

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			20986583	9/15/2021	9/15/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			4895944100	9/21/2021	9/21/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lee County Board of County Commissions is listed as an Additional Insured with respects to the General Liability policy under the carriers Form # 55205.

CERTIFICATE HOLDER**CANCELLATION**

LEE COUNTY BOCC PROCUREMENT MANAGEMENT
 1500 MONROE ST, 4TH FLOOR
 FORT MYERS FL 33901

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE